r the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

ETITION FOR EXTENSION OF TIME UNDER 37 CF	Docket Number (Optional) R 1.136(a) 101215-55
In re Application of	= ED
Baining LIU et al.	Filed 5
Application Number 09/765,226	January 18, 2001 A.
For	Junuary 10, 2001
Frequency-converted Lase	r Apparatus with Frequency Conversion
Group Art Unit	Examiner
2828	Tuan M. NGUYEN
This is a request under the provisions of 37 CFR 1.136(a) to exter reply in the above identified application.	nd the period for filing a
The requested extension and appropriate non-small-entity fee are (check time period desired):	as follows
One month (37 CFR 1.17(a)(1))	\$
Two months (37 CFR 1.17(a)(2))	\$
Three months (37 CFR 1.17(a)(3))	\$
	\$
Four months (37 CFR 1.17(a)(4))	\$
Five months (37 CFR 1.17(a)(5))	¥
Applicant claims small entity status. See 37 CFR 1.27. The	
above is reduced by one-half, and the resulting fee is: \$ 205	<u> </u>
Payment by credit card. Form PTO-2038 is attached.	
The Commissioner has already been authorized to charge	fees in this
application to a Deposit Account. The Commissioner is hereby authorized to charge any fees	which may be required
or credit any overpayment, to Deposit Account Number 14	
I have enclosed a duplicate copy of this sheet.	
I am the applicant/inventor	
assignee of record of the entire interest. See 37	CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed	. (Form PTO/SB/96).
attorney or agent of record.	
attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)	
WARNING: Information on this form may become public. be included on this form. Provide credit card information	
<u>02/26/03</u>	arish Wilchaud
Date	Signature
03/03/2003 SFELEKE1 00000049 141263 09765226	Christa Hildebrand (Reg. No. 34,953)
01 FC:2252 205.00 CH	Typed or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest forms if more than one signature is required, see below.	or their representative(s) are required. Submit multiple
TOTAL TRAINER SHALL SHE SHELL SHE SHELL SH	
Total of forms are submitted.	